

Engagement Assurance Committee Cover Sheet

Item 8 Enclosure D

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| Title: | Equalities Sub-Committee briefing |
| Meeting Date: | 22 May 2024 |
| Author: | Roger Hendicott, EDI and OD Project Manager |
| Executive Lead: | Tosca Fairchild, Chief of Staff / Equalities SRO |

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| Purpose of paper: | Provide an update on the Equalities Sub-Committee held on 2 May 2024. | Update / Information | X |
| | | Discussion | |
| | | Decision | |
| Summary of main points: | Key items covered at the Equalities Sub-Committee meeting: | | |
| | 1. Inclusive Leadership | | |
| | <p>The paper tabled noted the ICB's current requirements for the need to progress inclusive leadership within the organisation, namely,</p> <ul style="list-style-type: none"> • The NHS EDI Improvement Plan 2023 setting out actions to address prejudice and discrimination within the NHS workforce, highlights Board objectives. • The Messenger Review (2022) of NHS Leadership also recommended that <i>all</i> leaders and managers take responsibility for EDI. • Domain 3 of the EDS 2022 assessment revealed a need for the ICB to focus upon inclusive leadership, where lower scores had been achieved. Although the ICB was not an outlier, the Domain 3 was scored internally by the ICB, based upon the evidence available at the time. It therefore represented an opportunity for self-reflection and learning. • The EDI Improvement Plan requires CEOs, Chairs and Board Members to have a specific and measurable EDI objective for which they are individually and collectively responsible. All ICB personal objectives include one on EDI but a review is needed to understand what these objectives are and the degree to which they are being completed. | | |
| | <p>An overview of inclusive leadership was presented, and it was noted that the ICB would need to include a measurable objective around inclusive leadership. A comprehensive discussion on the topic took place and it was noted that the EDI Team had Board support and engagement for this work, and it was now for the Team and the ESC to develop an action plan to make progress.</p> <p>Noting that this paper had been tabled it was agreed that it be brought back as a substantive agenda item at the next meeting, once members had had a chance to</p> | | |

reflect upon its contents. The future iteration of this paper would take cognisance of the discussion points that were raised by ESC members.

2. EDS 2022 update

The EDS 2022 Assessment has been published on the ICB website. It has also been discussed at the ICB Board and its recommendations have been adopted. The Assessment covered ICS partners. Kings and GSTT have yet to publish their improvement plans and the ICB was supporting them to do so. An after-action review has been completed.

Planning for EDS 2024/25 has commenced and a meeting with ICS providers has been held. An ICS template has also been developed to help identify the services for assessment under Domain 1. Domains 2 and 3 will be led by the EDI team and will include the work on inclusive leadership.

3. EHRC update

The ICB had received their specific feedback from the EHRC following their PSED compliance audit. The Engagement function was highlighted as representing good practice, specifically the efforts made by the ICB to engage with protected characteristic groups. The PSED report was also highlighted as one of the most comprehensive they had so far encountered. The ICB was compliant and the EHRC had confidence that the ICB would also be compliant with this year's review. An EHRC Board briefing paper has been prepared and will be shared with ESC members once presented to the Board

4. Management Cost Reduction EIA

A deep dive into each protected characteristic both pre and post the MCR process was undertaken. The EIA report has been completed and concluded that the MCR process had no material impact on people with protected characteristics. The EIA has been received by the MCR Programme Board and would be reported to the ICB Board and included within the scheduled all staff briefing.

5. Deep Dive: Population Health and Equity Plan

The following points were highlighted:

- The Population Health and Equity Team focus upon delivering a small number of projects either at scale, or that can be rapidly scaled. It develops partnerships to leverage wider input and apply a population health and equity approach to all their work.
- The team refreshed their vision and priorities and aim to make SEL a place where background, post code income or ethnicity will not predict future health. This will require partnership working with communities to ensure long term improvements in health outcomes across three interconnected priorities: Prevention, wellbeing and equity, Population Health Management and Socio-economic development.
- The Teams are proposing to work through a Prevention and Equity Board, replacing the current Population Health and Equity Executive, with equal status to other ICB care pathway and transformation boards. Population health will be seen as an enabler for system transformation.

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| | <ul style="list-style-type: none">• A refreshed and improved governance process for the Team’s work is being proposed and will link with ESC through membership of the Committee. Consideration was being given to ensure Borough representation on the Population Health and Equity Board.• Discussion is to be undertaken to understand where Population Health and EDI connect. | | | |
| Potential Conflicts of Interest | None | | | |
| Relevant to the following Boroughs | Bexley | X | Bromley | X |
| | Greenwich | X | Lambeth | X |
| | Lewisham | X | Southwark | X |
| | Equality Impact | Committee covers all aspects of the Equality Act 2010. | | |
| | Financial Impact | N/A | | |
| Other Engagement | Public Engagement | Features regular updates on engagement with people and communities. | | |
| | Other Committee Discussion/ Engagement | N/A | | |
| Recommendation: | EAC are members asked to note contents of this report | | | |